## APPLICATION DATA SHEET

Postal or Zip Code of mailing

address::

Application Information Application Type:: Regular Subject Matter:: Utility Sequence submission?:: Yes Computer Readable Form (CRF)?:: Yes Number of copies of CRF:: One Title:: Therapeutic Agents and Methods of Use Thereof for the Modulation of Angiogenesis Attorney Docket Number:: PPI-106CP2 Request for Early Publication?:: No Request for Non-Publication?:: No Total Drawing Sheets:: 2 Small Entity?:: No Secrecy Order in Parent Appl.?:: No Applicant Information Applicant Authority Type:: Inventor Primary Citizenship Country:: US -Status:: **Full Capacity** Given Name:: Gary Middle Name:: L. Family Name:: Olson City of Residence:: Mountainside State or Province of Residence:: NJ Country of Residence:: US Street of mailing address:: 1505 Coles Avenue City of mailing address:: Mountainside State or Province of mailing address:: NJ Country of mailing address::

US

07092

Inventor Applicant Authority Type:: UK Primary Citizenship Country:: Status:: **Full Capacity** Given Name:: Christopher Family Name:: Self City of Residence:: West Caldwell State or Province of Residence:: NJ Country of Residence:: US Street of mailing address:: 32 Natalie Drive City of mailing address:: West Caldwell State or Province of mailing address:: NJ Country of mailing address:: US Postal or Zip Code of mailing address:: 07006 ı,D Applicant Authority Type:: Inventor Primary Citizenship Country:: US Status:: **Full Capacity** Given Name:: Lily Family Name:: Lee City of Residence:: Edison State or Province of Residence:: NJ Country of Residence:: US Street of mailing address:: 245 Prestwick Way City of mailing address:: Edison State or Province of mailing address:: NJ Country of mailing address:: US Postal or Zip Code of mailing

08820

address::

Applicant Authority Type:: Inventor US Primary Citizenship Country:: Status:: **Full Capacity** Given Name:: Charles Middle Name:: Michael Family Name:: Cook City of Residence:: Mendham State or Province of NJ Residence:: US Country of Residence:: Street of mailing address:: 21 Phoenix Drive City of mailing address:: Mendham State or Province of mailing address:: NJ Country of mailing address:: US Postal or Zip Code of mailing address:: 07945 Applicant Authority Type:: Inventor Primary Citizenship Country:: Denmark Status:: **Full Capacity** Given Name:: Jens Family Name:: Birktopf City of Residence:: **New York** State or Province of Residence:: NY Country of Residence:: US Street of mailing address:: 350 Central Park West Apt. 95 City of mailing address:: New York State or Province of mailing address:: NY

US

10025

Country of mailing address::

Postal or Zip Code of mailing

address::

Correspondence Information

Correspondence Customer

Number::

000959

Representative Information

Representative Customer	000959
Number::	

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-Part	09/972,772	October 5, 2001
09/972,772	Continuation-in-Part	09/704,251	November 1, 2000

Assignee Information

Assignee name:: Praecis Pharmaceuticals Inc.

Street of mailing address:: 830 Winter Street

City of mailing address:: Waltham

State or Province of mailing

address:: MA

Country of mailing address::

Postal or Zip Code of mailing

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Address:: 02451